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Application Data Sheet 37 CFR 1.76			Attome	y Dock	et Number	USC	4011	4		
			Applica	tion Nu	mber					
Title of Invention	Method and Syst	tem for Dete	cting Artifa	icts in IC	U Patient Re	ecords b	y Dat	ta Fusion and Hypot	hesis Te	sting
The application data she bibliographic data arrang This document may be document may be printed	ged in a format speci completed electroni	fied by the Un cally and sub	ited States I mitted to th	Patent an	d Trademark	Office as	outlin	ed in 37 CFR 1.76.		
Secrecy Order	37 CFR 5.	2								
								inder a Secrecy Or be filed electronic		suant to
Applicant Info	rmation:									
Applicant 1								Remove	1	
Applicant Authorit	v (•)Inventor (	∩Legal Rep	resentativ	e under	35 U.S.C. 1	17	()Pi	arty of Interest unde	r 35 U.S	.C. 118
Prefix Given Nam		M	iddle Nar	me	Family N			lame		Suffix
Mr. Walid		М	II if any			Ali				
Residence Informa	ation (Select Or	ne) 💿 US	Residenc	у О	Non US R	esidenc	у (	Active US Military	y Service	<del></del>
City Croton-on-H	<u> </u>									
Citizenship under	37 CFR 1.41(b)	i EG						'		
Mailing Address of	f Applicant:									
Address 1	1302 Half I	Moon Bay D	rive							
Address 2										
City Croton-	on-Hudson			- :	State/Provi	ince	1	NY		
Postal Code	10520			Count	ryi US					
All Inventors Must generated within this				nformat	ion blocks	may	be	Add		
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Application Inf	formation:						-			
Title of the Invention	on Method Testing		n for Detec	ting Artif	acts in ICU F	Patient F	Recor	ds by Data Fusion a	nd Hypo	thesis
Attorney Docket N	umber US040	US040114 Small Entity Status Claimed								
Application Type	Nonpro	visional								
Subject Matter	Utility									
Suggested Class (	if any)				Sub Cla	ss (if a	ny)			
Suggested Techno	ology Center (if	any)			1					
Total Number of D	rawing Sheets	(if any)			Suggest	ed Fig	ure f	or Publication (if	any)	

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Application Data Sheet 37 CFR 1.76		Attorney D	Oocket Number US040114						
		Application	on Number						
Title of Invention Method and System for Detecting Artifacts in ICU Patient Records by Data Fusion and Hypothesis Testing									
Publication Inform	nation:								
Request Early	Publica	ation (Fee required a	t time of Rec	uest 37 CFR 1.2	219)				
and certify the	at the in	h. I hereby request vention disclosed in other country, or unde	the attached	application has	not been an	d will not	be the su	bject of an	
Representative Information:  Representative information should be provided for all practitioners having a power of attorney in the application. Providing this information in the Application Data Sheet does not constitute a power of attorney in the application (see 37 CFR 1.32).									
are completed the Cu	Enter either Customer Number or complete the Representative Name section below. If both sections are completed the Customer Number will be used for the Representative Information during processing.								
Please Select One		Customer Number	r Ous	Patent Practitione	er U	3 Represe	ntative (37	CFR 11.9)	
Customer Number		24737							
Domestic Priority Information:  This section allows for the applicant to claim benefit under 35 U.S.C. 119(e), 120, 121, or 365(c). Providing this information in the application data sheet constitutes the specific reference required by 35 U.S.C. 119(e) or 120, and 37 CFR 1.78(a)(2) or CFR 1.78(a)									
		e made part of the spe	cification.	Г					
Prior Application		O a maltina a situa a	T	D	Ni		Remove	00/1414 DD)	
Application Nur	nper	Continuity	Type	Prior Application Number   Filing Date (YYYY-MM-I				YY-MM-DD)	
		non provisional of		60/541688		2004-02	2-04 		
Additional Domestic Priority Data may be generated within this form by selecting the Add button.									
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This section allows for the applicant to claim benefit of foreign priority and to identify any prior foreign application for which priority is not claimed. Providing this information in the application data sheet constitutes the claim for priority as required by 35 U.S.C. 119(b) and 37 CFR 1.55(a).									
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Application Nur	nber	Country	y 1	Parent Filing Date (YYYY-MM-DD)  Priority Claim  Yes N					
Additional Foreign Priority Data may be generated within this form by selecting the Add button.									
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Assignee 1							Remove		
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US040114

Attorney Docket Number

• •			Application N	lumber			
Title of Invention Method and System for Detecting Artifacts in ICU Patient Records by Data Fusion and Hypothesis Testing							
Organization Name	Organization Name KONINKLIJKE PHILIPS ELECTRONIC, N.V.						
Mailing Address Information:							
Address 1		GROENEWOUDSEV	VEG 1				
Address 2							
City		EINDHOVEN		State/Provin	ce		
Country   NL				Postal Code		5621 BA	
Phone Number				Fax Number			

## Signature:

button.

**Email Address** 

Application Data Sheet 37 CFR 1.76

A signature of the applicant or representative is required in accordance with 37 CFR 1.33 and 10.18. Please see 37 CFR 1.4(d) for the form of the signature.								
Signature	/Aaron Waxler/		Date (YYYY-MM-DD)	2006-07-19				
First Name	Aaron	Last Name	Waxler	Registration Number	48,027			

Additional Assignee Data may be generated within this form by selecting the Add

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